



CITY OF SOMERVILLE, MASSACHUSETTS
OFFICE OF STRATEGIC PLANNING & COMMUNITY DEVELOPMENT
JOSEPH A. CURTATONE
MAYOR

DIVISION OF INSPECTIONAL SERVICES

BUILDING DEPARTMENT

I, Kelly A Como, as Keeper of the Records for the City of Somerville, Mayors Office of Strategic Planning and Community Development, Inspectional Services Division, hereby certify that the documents herewith are true and accurate copies of documents in the custody of the Inspectional Services Division relative to the following property:

255 WASHINGTON ST.

3 copies

Signed under the pains and penalties of perjury, this 23 day of NOV, 2011.

Kelly A Como
Signature

KELLY A COMO
Print Name





CITY OF SOMERVILLE
DIVISION OF INSPECTIONAL SERVICES

APPLICATION FOR A PERMIT TO BUILD, ALTER, REPAIR,
IN ACCORDANCE WITH SECTION 110.0
OF THE MASSACHUSETTS STATE BUILDING CODE

PLEASE TYPE OR PRINT CLEARLY IN INK

FOR OFFICIAL USE ONLY

FEE

DATE REC'D

ACCEPTED BY

DATE ISSUED

DATE DENIED

PERMIT NO.

MAP 73 BLOCK E LOT 24

255 WASHINGTON ST

HENRY PATILSON 260 ELIOT ST NORTON 01760

REGISTRATION NUMBER

TELEPHONE

NAME AND ADDRESS OF BUILDER/LICENSE HOLDER

CONST. SUPER. LIC. NO. H.I.C. REG. NO. SIGNATURE (REQ'D)

5. ZONING DIST. TYPE OF PERMIT: ☐ NEW ☐ ADDITION ☐ CERTIFICATE OF OCCUPANCY

6. WARD ☐ REPAIR ☐ DEMOLITION ☒ ALTERATION ☐ OTHER

7. CURRENT USE(S) PROPOSED USE(S)

8. IF USE(S) IS A RESIDENCE, INDICATE NUMBER OF DWELLING UNITS USE GROUP

9. ESTIMATED CONSTRUCTION COST PLANS SUBMITTED ☐ YES ☒ NO

10. WHAT IS THE CONSTRUCTION TYPE? AREA FRONT YARD REAR YARD RIGHT SIDE LEFT SIDE

11. LOT DIMENSIONS PROPOSED SETBACKS FRONT YARD REAR YARD RIGHT SIDE LEFT SIDE

12. HEIGHT OF STRUCTURE (FT.) TOTAL SQUARE FOOTAGE NUMBER OF STORIES

13. DOES THE PROPOSED PROJECT REQUIRE A VARIANCE AND/OR SPECIAL PERMIT? ☐ YES ☒ NO

IF YES, AND A DECISION HAS BEEN ISSUED, PLEASE GIVE DECISION NUMBER

14. IS PROPOSED WORK WITHIN A HISTORIC DISTRICT? ☐ YES ☒ NO IF YES, GIVE COMMISSION APPROVAL DATE

15. WASTE DISPOSAL COMPANY DISPOSAL SITE ADDRESS

16. DEMOLITION HAS DEPT. NOTIFICATION FORM BEEN COMPLETED? ☐ YES ☒ NO

DETAILED DESCRIPTION OF PROPOSED CONSTRUCTION
(DO NOT INDICATE "SEE ATTACHED PLANS," PLEASE BE SPECIFIC)

NEW EXTERIOR AWNINGS LETTER OF PERMISSION INCLUDED
AWNING #1 LETTERED "KONNARONG" 8'x8'x4'
AWNING #2 LETTERED "TULI LINDS LUX" 12'W x 4' HIGH
-20 SF of signage-

ARE THE FOLLOWING INCLUDED?

	YES	NO
OCCUPYING STREET OR SIDEWALK	(1) <input checked="" type="checkbox"/>	<input type="checkbox"/>
DUMPSTER ON CITY PROPERTY	(1) <input type="checkbox"/>	<input checked="" type="checkbox"/>
ELECTRICAL	(1) <input checked="" type="checkbox"/>	<input type="checkbox"/>
PLUMBING/GAS FITTING	(1) <input checked="" type="checkbox"/>	<input type="checkbox"/>
HEATING (Mechanical)	(1) (2) <input checked="" type="checkbox"/>	<input type="checkbox"/>
OIL STORAGE	(1) <input type="checkbox"/>	<input checked="" type="checkbox"/>
AIR CONDITIONING	(1) (2) <input checked="" type="checkbox"/>	<input type="checkbox"/>
PUBLIC WATER/SEWER	(1) <input checked="" type="checkbox"/>	<input type="checkbox"/>
FIRE SUPPRESSION (Mechanical)	(1) (3) <input checked="" type="checkbox"/>	<input type="checkbox"/>
FIRE DETECTION	(3) <input type="checkbox"/>	<input checked="" type="checkbox"/>
WOOD BURNING APPLIANCE	(1) <input type="checkbox"/>	<input checked="" type="checkbox"/>

NOTES: 1. REQUIRES SEPARATE PERMIT
NOTES: 2. HEAT LOSS INFO REQUIRED
NOTES: 3. STAMPED PLAN REQUIRED

I HAVE PROVIDED THE ABOVE INFORMATION AND IT IS CORRECT TO THE BEST OF MY KNOWLEDGE

Signature of Owner or Authorized Agent

Print name clearly

Street

City

Phone number where you can be reached (day)

APPROVED

Inspector Name and Title



CITY OF SOMERVILLE
DIVISION OF INSPECTIONAL SERVICES

APPLICATION FOR A PERMIT TO BUILD ALTER REPAIR
IN ACCORDANCE WITH SECTION 110.0
OF THE MASSACHUSETTS STATE BUILDING CODE
PLEASE TYPE OR PRINT CLEARLY IN INK

FOR OFFICE USE ONLY

FEE: \$ 702

DATE REC'D: 2-1-16

ACCEPTED BY: [Signature]

DATE ISSUED: 2-1-16

DATE DENIED: _____

PERMIT NO.: 71P-11-5331

1. LOCATION OF PROPERTY (NO. AND STREET) <u>255 WASHINGTON ST</u>		MAP <u>74</u> BLOCK <u>D</u> LOT <u>5</u>	
2. NAME AND ADDRESS OF PROPERTY OWNER <u>BERMANT HILL AGENCY 10 BX 187 WHITE MA</u>			
3. NAME AND ADDRESS OF ARCHITECT/ENGINEER <u>N/A</u>			
REGISTRATION NUMBER		TELEPHONE	
4. NAME AND ADDRESS OF BUILDER/LICENSE HOLDER <u>BRN DIXON 110 CENTRAL ST</u> TELEPHONE: <u>617 947 763</u>			
CONST. SUPER. LIC. NO. <u>27099</u>		H.I.C. REG. NO. <u>132104</u> SIGNATURE (REQ'D) <u>[Signature]</u>	
5. ZONING DIST. <u>2</u>	TYPE OF PERMIT: <input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> CERTIFICATE OF OCCUPANCY		
6. WARD <u>2</u>	<input type="checkbox"/> REPAIR <input type="checkbox"/> DEMOLITION <input checked="" type="checkbox"/> ALTERATION <input type="checkbox"/> OTHER		
7. CURRENT USE(S) <u>BARBER SHOP</u>		PROPOSED USE(S) <u>BARBER SHOP</u>	
8. IF USE(S) IS A RESIDENCE, INDICATE NUMBER OF DWELLING UNITS		USE GROUP <u>0</u>	
9. ESTIMATED CONSTRUCTION COST <u>\$17,500</u>			
10. WHAT IS THE CONSTRUCTION TYPE?		PLANS SUBMITTED <input type="checkbox"/> YES <input type="checkbox"/> NO	
11. LOT DIMENSIONS	AREA <u>196</u>	FRONT YARD <u>14</u>	REAR YARD <u>14</u> RIGHT SIDE <u>14</u> LEFT SIDE <u>14</u>
12. PROPOSED SETBACKS	FRONT YARD <u>—</u>	REAR YARD <u>—</u>	RIGHT SIDE <u>—</u> LEFT SIDE <u>—</u>
13. HEIGHT OF STRUCTURE (FT.) <u>20'</u>	TOTAL SQUARE FOOTAGE <u>196</u>		NUMBER OF STORIES <u>1</u>
14. DOES THE PROPOSED PROJECT REQUIRE A VARIANCE AND/OR SPECIAL PERMIT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
IF YES, AND A DECISION HAS BEEN ISSUED, PLEASE GIVE DECISION NUMBER			
15. IS PROPOSED WORK WITHIN A HISTORIC DISTRICT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, GIVE COMMISSION APPROVAL DATE			
16. WASTE DISPOSAL COMPANY <u>DM DATE DISPOSAL</u>		DISPOSAL SITE ADDRESS <u>EVETT, MA</u>	
17. DEMOLITION: HAS DEPT. NOTIFICATION FORM BEEN COMPLETED? <input type="checkbox"/> YES <input type="checkbox"/> NO			

DETAILED DESCRIPTION OF PROPOSED CONSTRUCTION
(DO NOT INDICATE "SEE ATTACHED PLANS," PLEASE BE SPECIFIC)

INTERIOR RENOVATION OF ONE-STORY COMMERCIAL RETAIL SPACE.
REPLASTER WALLS, RE-WIRE FOR OUTLET + LIGHTING + TELCO.
REPLASTER W THICK 5/8" FOR ONE-HOUR FIRE RATING.
RESTORE EXISTING FLOOR + TIN CEILING

ARE THE FOLLOWING INCLUDED?

I HAVE PROVIDED THE ABOVE INFORMATION AND IT IS CORRECT TO
THE BEST OF MY KNOWLEDGE.



CITY OF SOMERVILLE
DIVISION OF INSPECTIONAL SERVICES
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PLEASE TYPE OR PRINT CLEARLY IN INK

FOR OFFICE USE ONLY

FEE:

DATE REC'D:

ACCEPTED BY:

DATE ISSUED:

DATE DENIED:

PERMIT NO.:

1. LOCATION OF PROPERTY (NO. AND STREET) 255 WASHINGTON ST / 19 SUBJ. MAP 73 BLOCK E LOT 24

2. NAME AND ADDRESS OF PROPERTY OWNER KEENE'S BEDS REALTY TRUST

3. NAME AND ADDRESS OF ARCHITECT/ENGINEER ALBERTO J. CAVE
REGISTRATION NUMBER 10708 TELEPHONE 617 733 7711

4. NAME AND ADDRESS OF BUILDER/LICENSE HOLDER BENJAMIN C. DEYER TELEPHONE 617 917 2703
CONST. SUPER. LIC. NO. 092999 H.I.C. REG. NO. 152207 SIGNATURE (REQ'D) [Signature]

5. ZONING DIST. CBD TYPE OF PERMIT: ☐ NEW ☐ ADDITION ☐ CERTIFICATE OF OCCUPANCY
☐ REPAIR ☐ DEMOLITION ☐ ALTERATION ☐ OTHER

6. WARD 2

7. CURRENT USE(S) B (OFFICE) PROPOSED USE(S) B (ASSEMBLY UNITS 110)

8. IF USE(S) IS A RESIDENCE, INDICATE NUMBER OF DWELLING UNITS — USE GROUP B

9. ESTIMATED CONSTRUCTION COST 62000.00

10. WHAT IS THE CONSTRUCTION TYPE? II PLANS SUBMITTED ☒ YES ☐ NO

11. LOT DIMENSIONS AREA 11000 FRONT YARD 10' REAR YARD 10' RIGHT SIDE 110' LEFT SIDE 110'

12. PROPOSED SETBACKS 110' FRONT YARD REAR YARD RIGHT SIDE LEFT SIDE

13. HEIGHT OF STRUCTURE (FT.) 27' TOTAL SQUARE FOOTAGE 18000 NUMBER OF STORIES 1

14. DOES THE PROPOSED PROJECT REQUIRE A VARIANCE AND/OR SPECIAL PERMIT? ☒ YES ☐ NO
IF YES, AND A DECISION HAS BEEN ISSUED, PLEASE GIVE DECISION NUMBER DB # 7-11-09

15. IS PROPOSED WORK WITHIN A HISTORIC DISTRICT? ☐ YES ☒ NO IF YES, GIVE COMMISSION APPROVAL DATE

16. WASTE DISPOSAL COMPANY TIGER, WINDEN MA DISPOSAL SITE ADDRESS CARROLL TRAIL

17. DEMOLITION: HAS DEPT. NOTIFICATION FROM BEEN COMPLETED? ☐ YES ☒ NO

DETAILED DESCRIPTION OF PROPOSED CONSTRUCTION

(DO NOT INDICATE "SEE ATTACHED PLANS," PLEASE BE SPECIFIC)

AN ALTERATION OF AN EXISTING 1203 S.F. COMMERCIAL SPACE FROM OFFICE
TO A RESTAURANT SPACE WITH KITCHEN UNDER 400. NEW INTERIOR
NON-BEARING PARTITIONS; PLUMBING, WIRING + FINISH WORK. NEW & ADDITIONAL
FIRE ALARMS, COMPARTMENT & FLOOR FIRE SEPARATION. NO EXTERIOR WORK.
NO GAS FITTING OR KITCHEN CONSTRUCTION. ELECTRICAL WORK TO BE RUN
FROM 200A 3PH 5-24 WIRE TRANSFORMER INSTALLED + INSPECTED LAST YEAR -
LOAD CALCULATION TO BE SUBMITTED TO ELECTRICAL INSPECTOR.

ARE THE FOLLOWING INCLUDED?

YES NO

OCCUPYING STREET OR SIDEWALK (1) ☐ ☒

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THE BEST OF MY KNOWLEDGE.